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STASYSZE	N RICHARD E									
Form 4										
September 2	3, 2011									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287	
Check th							Expires:	January 31,		
if no long subject to	HANGES IN	GES IN BENEFICIAL OWN				Estimated a	2005 average			
Section 1			SECUF	SECURITIES				burden hours per		
Form 4 o Form 5		~		~ .				response	0.5	
obligatio	n c *		tion 16(a) of th			•				
may cont			•	•	· ·	•	1935 or Section	l		
See Instru	uction	30(n) 01	the Investment	Compar	iy Ac	1 01 1940	0			
1(b).										
(Print or Type I	Responses)									
	•									
1. Name and A	ddress of Reporting	Person <u>*</u> 2	. Issuer Name and	I Ticker or	Tradi	ng	5. Relationship of	Reporting Pers	on(s) to	
STASYSZE	mbol				Issuer					
	TAGE STORE	S INC [S	SI]		(Check all applicable)					
(Last)	(First) (Middle) 3.]	Date of Earliest T	ransaction			(Check)	
			lonth/Day/Year)	h/Day/Year)			Director		Owner	
			/21/2011	/2011				_X_ Officer (give title Other (specify below)		
							SVP, Finance and Controller			
			If Amendment, Da	endment, Date Original			6. Individual or Joint/Group Filing(Check			
			ed(Month/Day/Yea	-			Applicable Line)			
							X Form filed by O			
HOUSTON	, TX 77025						Form filed by Me Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Table I. Nov. I)	G		ind Discould of	an Dan affatall		
		-				-	iired, Disposed of,		-	
1.Title of Security	2. Transaction Date (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D)			5. Amount of Securities	6. Ownership	 Nature of Indirect 	
(Instr. 3)	(Woldin Day Tear)	any	Code	(Instr. 3,	-		Beneficially	Form: Direct		
		(Month/Day/	Year) (Instr. 8)				Owned	(D) or	Ownership	
							Following Reported	Indirect (I)	(Instr. 4)	
					(A)		Transaction(s)	(Instr. 4)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common						\$				
Stock	09/21/2011		А	23 <u>(1)</u>	А	14.046	12,778	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

D Se	. Title of berivative ecurity instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Inst
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addres	s	Relationships							
	Director	10% Owner	Officer	Other					
STASYSZEN RICHARD E 10201 MAIN STREET HOUSTON, TX 77025			SVP, Finance and Controller						
Signatures									
/s/ Richard E. Stasyszen	09/23/2011	l							
<u>**</u> Signature of Reporting Person	Date								

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These shares, which were acquired pursuant to the Stage Stores Deferred Compensation Plan (the "Plan"), may not be transferred to an alternative investment within the Plan or liquidated by the reporting person and will remain in the reporting person's account until such date as the reporting person is no longer an employee of the issuer and for a period of six months thereafter, at which time they will be transferred to the reporting person.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.